DED! WAWITWDIE AA!

| | | CLAIMS AS | (Column | | (Colum | n 2) | | ALL EN | _ | OR | OTHER T | |
|----------------------------------|--------------------------------------------|---------------------------------------------------------------------------|------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------|---------------------------------------------------|----------|-----------------------------------------------------------------|------------------------|----------------|-------------------------------------------------------------------------------------|------------------------|
| OTA | AL CLAIMS | | 28 | | | | | RATE | FEE | | RATE | FEE |
| OR | | | NUMBER FILED | | NUMBER EXTRA | | В | ASIC FEE | 370.00 | OR | BASIC FEE | 740.00 |
| OTAL CHARGEABLE CLAIMS | | | 7_\(\text{minus 20=} \) | | . 9 | | | X\$ 9= | | OR | X\$18= | |
| <u>·</u> | | | | minus 3 = | | * Q. | | X42= | ····· | | X84= | |
| IULTIPLE DEPENDENT CLAIM PRESENT | | | | 105 3 = | X | | - | A42= | | OR | | |
| _ | | | | | | | | +140= | | OR | +280=. | |
| if th | ne difference l | n column 1 is | less than ze | ro, ente | er "O" in ce | olumn 2 | | TOTAL | _ | OR | TOTAL | |
| | CL CL | AIMS AS A | MENDED | | | | | SMALL E | ENTITY | OR | OTHER SMALL E | |
| 1.54 | 1/2/05 | (Column 1) CLAIMS | | | ımn 2) HEST | (Column 3) | Г | | ADDI- | | | ADDI- |
| | | REMAINING AFTER | | | MBER IOUSLY | PRESENT EXTRA | -, | RATE | TIONAL FEE | | RATE | TIONAL FEE |
| | | AMENDMENT | | PAIC | FOR | | | X\$ 9= | PEE | | X\$18= | |
| | Total | * 25 | Minus | ## | | = | + | | | OR | | |
| | Independent FIRST PRESE | * S | Minus | PENDEN | NT CLAIM | | | X42= | | OR | X84= | |
| | FIRST PRESE | MINIONOFIV | OCH PCC DC | | | | | +140= | | OR | +280= | · |
| | | | | | • | | L | TOTAL | | | TOTAL | |
| | | | | | | | Δ | | | OR | ADDIT. FEE | |
| | | (Column 1) | | (Col | umn 2) | (Column 3) | | DDIT. FEE | | JOR - | ADDIT. FEE | |
| | | (Column 1) CLAIMS PEMAINING | | HIC | umn 2) SHEST IMBER | (Column 3) | | DDIT. FEE | ADDI- | Jon | | ADDI- |
| | | CLAIMS REMAINING AFTER | | HIC NU PRE\ | HEST | | | | ADDI- TIONAL FEE | JOH | ADDIT. FEE | ADDI- |
| OMENI B | Total | CLAIMS REMAINING | Minus | HIC NU PRE\ | HEST IMBER VIOUSLY | PRESENT | | DDIT. FEE | TIONAL | OR | RATE | ADDI- |
| ENDWEN D | Total Independent | CLAIMS REMAINING AFTER | | HIC NU PRE\ PAI | HEST IMBER VIOUSLY | PRESENT | | RATE | TIONAL FEE | OR | RATE X\$18= | ADDI- |
| AMENDMENI B | | CLAIMS REMAINING AFTER AMENDMENT | Minus Minus | HIC NU PREV PAI | HEST IMBER VIOUSLY ID FOR | PRESENT EXTRA | | RATE X\$ 9= X42= | TIONAL FEE | OR OR | RATE X\$18= X84= | ADDI- |
| AMENOMEN D | Independent | CLAIMS REMAINING AFTER AMENDMENT | Minus Minus | HIC NU PREV PAI | HEST IMBER VIOUSLY ID FOR | PRESENT EXTRA | | RATE X\$ 9= X42= +140= | TIONAL FEE | OR OR | RATE X\$18= X84= +280= | ADDI- TIONAL FEE |
| AMENDMENT B | Independent | CLAIMS REMAINING AFTER AMENDMENT | Minus Minus | HIC NU PREV PAI | HEST IMBER VIOUSLY ID FOR | PRESENT EXTRA | | RATE X\$ 9= X42= | TIONAL | OR OR | RATE X\$18= X84= +280= | ADDI- TIONAL FEE |
| AMENDMENT B | Independent | CLAIMS REMAINING AFTER AMENDMENT * * * * (Column 1) | Minus Minus MULTIPLE DE | PREV PAI | HEST IMBER VIOUSLY ID FOR NT CLAIM | PRESENT EXTRA | | RATE X\$ 9= X42= +140= TOTAL | TIONAL | OR OR | RATE X\$18= X84= +280= TOTAL | ADDI- TIONAI FEE |
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| v | Independent | CLAIMS REMAINING AFTER AMENDMENT * * * (Column 1) CLAIMS | Minus MULTIPLE DE | PENDEI (Co | HEST IMBER VIOUSLY ID FOR NT CLAIM | PRESENT EXTRA | | RATE X\$ 9= X42= +140= TOTAL | TIONAL FEE | OR OR | RATE X\$18= X84= +280= TOTAL ADDIT. FEE | ADDI-TIONAL FEE |
| v | Independent | CLAIMS REMAINING AFTER AMENDMENT * * (Column 1) CLAIMS REMAINING AFTER | Minus MULTIPLE DE | PENDEI (Co | IMBER VIOUSLY ID FOR NT CLAIM GHEST JMBER VIOUSLY | PRESENT EXTRA | | RATE X\$ 9= X42= +140= TOTAL ADDIT. FEE | ADDI- TIONAL | OR OR | RATE X\$18= X84= +280= TOTAL ADDIT. FEE | ADDI- TIONAI FEE |
| O. | Independent FIRST PRESE Total Independent | CLAIMS REMAINING AFTER AMENDMENT * * * * * * * * * * * * * | Minus AULTIPLE DE Minus Minus Minus | PENDEI PRE PAI *** PENDEI PRE PA *** | IMBER VIOUSLY ID FOR SHEST JMBER VIOUSLY ID FOR | PRESENT EXTRA Column 3 PRESENT EXTRA | | RATE X\$ 9= X42= +140= TOTAL ADDIT. FEE | ADDI- TIONAL | OR OR | RATE X\$18= X84= +280= TOTAL ADDIT. FEE X\$18= X\$18= | ADDI- TIONAL FEE |
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| AMENDMENT C | Independent FIRST PRESE Total Independent | CLAIMS REMAINING AFTER AMENDMENT * * * * * * * * * * * * * | Minus AULTIPLE DE Minus Minus Minus MULTIPLE DI | PREVENDE PARTE PAR | IMBER VIOUSLY ID FOR NT CLAIM SHEST JMBER VIOUSLY ID FOR ENT CLAIR Write "0" in C | PRESENT EXTRA Column 3 PRESENT EXTRA Column 3. | | RATE X\$ 9= X42= +140= TOTAL ADDIT. FEE X\$ 9= | ADDI- TIONAL FEE | OR OR OR | RATE X\$18= X84= +280= TOTAL ADDIT. FEE X\$18= X\$4= +280= TOTAL ADDIT. FEE | ADDI- TIONAL FEE |

Application or Docket Number